SAFE INJECTION PRACTISES

What does Universal Safety Precautions mean?

They are control guidelines designed to protect workers from exposure to diseases spread by blood & other bodily fluids.

What does a single dose vial mean?

A single dose container designed for use with a single patient as an injection or infusion.

What does a multi-dose vial mean?

A container that holds more than 1 dose of a medication intended to be used for 1 patient only.

What are the 5 moments of hand hygiene (i.e when do you perform it)?

- 1- Before touching a patient.
- 2- Before performing a clean/aseptic procedure.
- 3- After exposure to body fluid.
- 4- After touching a patient.
- 5- After touching a patients' surroundings like bed, medications etc.

Safe injection, according to WHO, is defined as one which doesn't:

- Harm the recipient.
- Expose the provider to any avoidable risk.
- Waste that is dangerous for the community.

Most injections are given for:

- 90% in curative care.
- 5% in immunization.
- Rest in blood transfusion, IV drugs, & fluids.

4 main dangers associated with injections:

- Reuse of injection equipment.
- Needle stick injury.
- Overuse of injections.
- Unsafe way of disposing those injections.

In 2000, WHO Injection Safety Programme & SIGN estimated that unsafe injection was responsible for?

- 5% of new HIV cases.
- 40% of hepatitis C cases.
- 32% of Hepatitis B cases.

Which nerve can be damaged if incorrect injection? **Sciatic** nerve in **gluteal** injections.

VIP information about sharps bin:

- Do not fill sharp container more than 2/3 full.
- Discard all used needles & syringes IMMEDIATELY!
- Replace sharps containers after 1 month of usage.

Common injection routes:

- Intradermal
- Subcutaneous
- Intravenous
- Intramuscular

INTRADERMAL:

Which layer of the skin?

Dermis, just below the epidermis.

When is this route used?

- For sensitivity tests like tuberculin & allergy tests.
- Local anesthesia.

Angle?

10-15°.

Which injection route has the longest absorption time? Intradermal.

SUBCUTANEOUS:

Where is this?

SQ means under the skin. Inject medication into the tissue layer between the skin & muscle.

When is this route used for?

Most common medication which uses subcutaneous as route of administration is insulin.

Angle?

45°.

INTRAVENOUS:

Where?

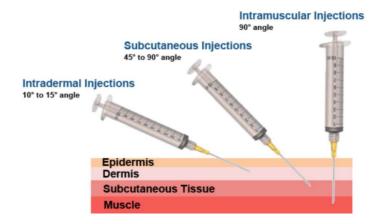
Within the vein.

This is the *fastest* way to deliver fluids & medications throughout the body. It goes directly into the bloodstream.

INTRAMUSCULAR:

This goes deep into the muscle for quick absorption.

Used for: Vaccines and EpiPen.



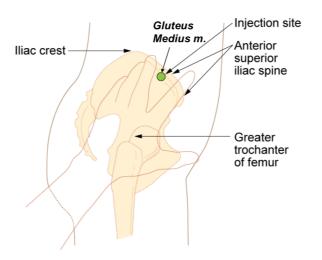
We will focus on intramuscular injections:

Where do we commonly inject intramuscularly?

- Deltoid muscle.
- Ventrogluteal (patient on the side).
- Dorsogluteal (patient sleeping on their stomach).
- Vastus lateralis.

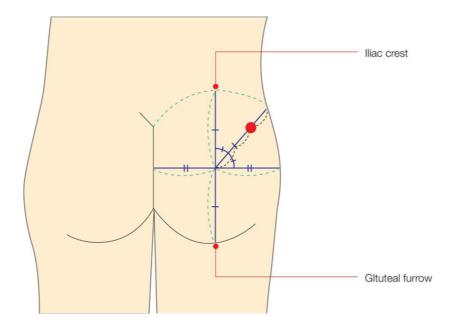
Ventrogluteal:

https://www.youtube.com/watch?v=wKCPiSnYqwA
https://www.youtube.com/watch?v=J1liVuMSy1M



Dorsogluteal:

https://www.youtube.com/watch?v=AxKEJQg6lB8



Vastus Lateralis:

https://www.youtube.com/watch?v=KEvYLM71HpE

https://www.youtube.com/shorts/OonC7flrHqs

https://www.youtube.com/watch?v=XFog6uSwbuw

Deltoid:

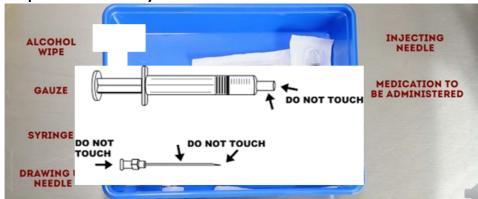
https://www.youtube.com/shorts/ZRWKMIdPOs0 https://www.youtube.com/shorts/O5NNwJhIQe0

What are some of the complications of IM injection to the gluteal region?

Nerve injury especially to the sciatic nerve.

Introduction & preparation before injection:

- Check allergy status.
- Check that you have all your equipment before going to the patient & say them out loud.



Locate the area & mention the anatomy while doing so.

Wear gloves & do WHO hand washing.

Clean the skin of patient with alcohol.

Warn the patient & tell them to take a deep breathe in while you are injecting.

MAKE SURE TO ASPIRATE!!!

Once done with injection THROW IT RIGHT AWAY.